24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Americas PAC	
	C C00559906
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Cumulus Media	M M / D D / Y Y Y Y
Mailing Address 595 East Plumb Lane	09 14 2016 Amount
City State Zip Code	16000.00
Reno NV 89502	Transaction ID: SE.4660 Date of Disbursement or Obligation
Purpose of Expenditure Media Purchase Category/ Type	09 / 11 / 2016
Name of Federal Candidate Support Office	e Sought: House District: 00
CATHERINE CORTEZ MASTO X Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbut 202008.00	orsement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
o.i.,	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	16000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7 7
(c) TOTAL Independent Expenditures	16000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Tom Donelson	N / D D / Y - Y - Y
[Electronically Filed] Date	09 14 2016
Signature	